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<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="margin: 0; font-size: small;">(to be used for all correspondence after initial filing)</p>		Application Number	10/806,252
		Filing Date	March 22, 2004
		First Named Inventor	Mark R. Kirkland
		Group Art Unit	1761
		Examiner Name	Viren A. Thakur
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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Check in the amount of \$____ <input checked="" type="checkbox"/> Credit card authorization in the amount of \$ <u>60.00</u> <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input checked="" type="checkbox"/> Extension of Time Request <u>1</u> month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Other: Replacement Sheet FIGS. 1-3
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
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Signature	<i>Julie K. Morriss</i>	Date	3-15-07
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CERTIFICATE OF MAILING UNDER 37 CFR § 1.8			
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Signature	<i>Julie K. Morriss</i>	Date	3-15-07